

MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

ORIGINAL OR AMENDED

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r 11_2-	
1878	- Dailfill

STATEMENT OF ORGANIZATION I	FORM FOR CANDIDATE COMMITTEES
1. Committee ID#: 150590	10. X REPORTING WAIVER REQUEST: Inthe committee does
2. Type of Filing:	not expect to receive or expend herecass of \$1,000 in an election and checks this box, the filing requirement of pre, post and annual
Original .	campaign statements is waived. The Reporting Waiver will be
Amendment to Items: Eff. Date:	automatically lost if the committee exseeds the \$1,000 threshold.
3. Full Name of Committee (must include Candidate's first and last name) Chad Si Newfor Sth Wand W	11. Name and Address of Depositories or Intended Depositories of committee funds. (Michigan Bank, Gredit Union or Savings & Loa Association)
4a. Candidate Full Name (Last, First, M.i.):	a. Official Depository
Dhad Gibla !!	" Chemia Cark
4b. Political Party (if applicable):	Milana Freet Branch Bay Ctty, ML 48706
4c. County of Residence:	b. Secondary Depository M. 48706
4d. Office Sought (Check one): Nitur Smmussion	b. Gecondary Depository
☐ Governor ☐ Lt. Governor ☐ State Senator ☐ State Rep. ☐ Sec. of State ☐ Attorney Gen.	
State Bd. of Ed. UofM Reg. MSU Trustee	12This item applies only to Gubernatorial Candidate
WSU Gov. Supreme Court Appeals Court	Committees: Check if this committee intends to seek qualifying
Circuit Court District Court Probate Court	contributions or make qualifying expenditures.
Municipal Court	13. ELECTRONIC FILING: This item applies to committees that file with
Local or other please specify:	the Michigan Department of State Bureau of Elections only and does not apply to Candidate Committees that file with the County Clerk's office
4e. District/Circuit # or Jurisdiction:	THE WILL BE COUNTY CIER'S ONICE
5. Date Committee was Formed: Mau/上ルル/	The Campaign Finance Act requires any committee that files with the
6a. Committee Phone #: 989 - 450 - 4538	Secretary of State and spends or receives \$20,000 in the preceding calendar
	year OR expects to spend or receive \$20,000 in the current calendar year to file campaign statements electronically. MERTS Plus software is provided to
6b. Committee Fax #:	you free of charge to assist you in meeting this requirement.
6c. Committee E-mail Address: Wad 11/16 & NAMA	
6d. Committee Website Address: W/4	Committee spent or received or expects to spend or receive in excess of \$20,000 and is required to file electronically.
7a. Complete Comm. Mailing Address (May be PO Box):	** OR **
804 hitchfield street	Committee did not spend or receive or does not expect to spend
han Nite Mil Marie	or receive in excess of \$20,000 and would like to file electronically
7b. Complete Confin. Street Address (May not be PO Box):	voluntarily.
FO. 10 - C	14. Verification: I/We certify that all reasonable diligence was used in the properties of the above that all reasonable diligence was used
ourne	in the preparation of the above statement and that the contents are true, accurate and complete to the best of my/our knowledge or
	belief. If filing electronically, we further agree that the signatures
8. Treasurer Name and Complete Address:	below shall serve as the signatures that verify the accuracy and completeness of each statement filed electronically by the committee.
of freeduct frame and complete Address.	I/We certify that all reasonable diligence will be used in the
game	preparation of each statement electronically filed by this committee and that the contents of each statement will be true, accurate and
	complete to the best of my/our knowledge or belief. (Sign Name
	and Date () · ()
Phone #:	(hun try, 5-31-2011
-mail Address:	Candidata
Designated Record Keeper Name and Complete Address:	
11/	Charl Stoley 5-31-2011
NA	Current Treasurer
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hone #:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
E-mail Address:	Designated Record Keeper (Required only if filing electronically)